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Bib Data Sheet

CONFIRMATION NO. 5808

<b>SERIAL NUMBER</b> 10/025,119	<b>FILING DATE</b> 12/19/2001 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2681	<b>ATTORNEY DOCKET NO.</b> 3865/OK109
<b>APPLICANTS</b> Ari Hamalainen, Vantaa, FINLAND;				
<b>** CONTINUING DATA *****</b>				
<b>** FOREIGN APPLICATIONS *****</b> FINLAND 20002819 12/21/2000				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/24/2002</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FINLAND	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 14
		<b>INDEPENDENT CLAIMS</b> 4		
<b>ADDRESS</b> DARBY & DARBY P.C. 805 Third Avenue New York ,NY 10022				
<b>TITLE</b> Method for channel equalization, a receiver a channel equalizer, and a wireless communication device				
<b>FILING FEE RECEIVED</b> 824	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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<b>SERIAL NUMBER</b> 10/025,119	<b>FILING DATE</b> 12/19/2001 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2631	<b>ATTORNEY DOCKET NO.</b> 3865/OK109
<b>APPLICANTS</b> Ari Hamalainen, Vantaa, FINLAND; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> FINLAND 20002819 12/21/2000 <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/24/2002</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>                    </u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FINLAND	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 14
			<b>INDEPENDENT CLAIMS</b> 4	
<b>ADDRESS</b> 004955				
<b>TITLE</b> Method for channel equalization, a receiver a channel equalizer, and a wireless communication device				
<b>FILING FEE RECEIVED</b> 824	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees	
			<input type="checkbox"/> 1.16 Fees ( Filing )	
			<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	
			<input type="checkbox"/> 1.18 Fees ( Issue )	
			<input type="checkbox"/> Other _____	
			<input type="checkbox"/> Credit	